## ESTIMATE AND INVOICE FOR COPIES OR DUPLICATES

if more than \$0.15)  ii. color □ \$0.50 per page letter or legal sized or □ \$	Estima	te
c. Estimate of total cost \$		1 0 1
□ Estimate provided to requestor on □ in person □ by U.S.P.S. □ by phone □ other: □ in person □ by U.S.P.S. □ by phone □ other: □ in person □ by U.S.P.S. □ by phone □ other: □ in person □ by U.S.P.S. □ by phone □ other: □ \$		
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d. Cost for delivery for other than on-site pick-up: □ U.S.P.S. □	d.	Cost for delivery for other than on-site pick-up:   U.S.P.S.
other:		
e. Payment:	e.	•
(1) Form of payment:   Cash Check Other  Cash Check County of the County		
(2) Amount due: (Total cost minus prepayment):(3) Date of payment or refund:		